



## National Resource Center on Homelessness and Mental Illness

### HIV/AIDS, Homelessness and Serious Mental Illness

April 2004

*Resources listed herein are a selection of materials available on this topic. Many are available from your local library or inter-library loan. Unless otherwise noted, all other materials are available from the National Resource Center on Homelessness and Mental Illness. Photocopying charges are \$.10 per page; make checks payable to **Policy Research Associates, Inc.** If you have difficulty locating any of the materials listed in this bibliography, please contact the Resource Center at the phone number or e-mail address below.*

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## HIV/AIDS

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**Order #: 8509**

**Authors:** Adams, M.

**Title:** **HIV and Homeless Shelters: Policy and Practice.**

**Source:** New York, NY: American Civil Liberties Union, 1999. (Report: 11 pages)

**Abstract:** This report discusses the connection between HIV and homelessness. Rather than existing independent of each other, they are inextricably interwoven. The report discusses the links that bind prevention, care, and discrimination. It also gives a primer on HIV and homeless shelters, discusses what the law requires, and how to make shelters safer spaces for HIV prevention and care.

**Available From:** American Civil Liberties Union, 125 Broad Street, 18th Floor, New York, NY 10004, [www.aclu.org/issues/gay/hiv\\_homeless.html](http://www.aclu.org/issues/gay/hiv_homeless.html).

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**Order #: 7355**

**Authors:** AIDS Housing of Washington.

**Title:** **Financing AIDS Housing.**

**Source:** Seattle, WA: AIDS Housing of Washington, 1998. (Book: 165 pages)

**Abstract:** This comprehensive guide provides sources of funding and technical assistance to develop and operate supportive housing for people living with HIV/AIDS, including all federal programs such as those of the U.S. Dept. of Housing and Urban Development, as well as other available AIDS housing finance tools. Written as a reference tool for use during the planning and development phase of AIDS housing projects, the book includes information about funding sources arranged by agency; national, state and local contact information; application instructions; selection criteria; detailed program descriptions; and tips from AIDS housing developers.

**Available From:** AIDS Housing of Washington, 2014 East Madison, Suite 200, Seattle, WA 98122, (206) 322-9444, [info@aidshousing.org](mailto:info@aidshousing.org), [www.aidshousing.org](http://www.aidshousing.org) (COST: \$10.00)

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**Order #: 11390**

**Authors:** AIDS Housing of Washington.

**Title:** **Put Your House in Order: Securing Your Supportive Housing Program's Future through Effective Asset Management.**

**Source:** Seattle, WA: AIDS Housing of Washington, 2002. (Report: 79 pages)

**Abstract:** This guide is intended for anyone with a role in managing supportive housing. By supportive housing the authors mean residences targeted to persons with special needs such as HIV/AIDS, mental illness, substance abuse, and other conditions that frequently occur with homelessness. Typically, such settings combine housing with supportive services to stabilize and insure the well-being of residents. This guide is particularly useful for groups who own real estate that is used to house and support special populations in this manner. Groups who lease property for their housing program will find this guide to be an education in long-term issues to anticipate, should they buy real estate in the future. Others who may have an interest in this guide are property managers associated with supportive housing and contract managers or underwriters working for institutions with financial investments in supportive housing (authors).

**Available From:** AIDS Housing of Washington, 2014 East Madison, Suite 200, Seattle, WA 98122, (206) 322-9444, [info@aidshousing.org](mailto:info@aidshousing.org), [www.aidshousing.org](http://www.aidshousing.org).

Order #: 8008

**Authors:** Bailey, S.L., Camlin, C.S., Ennett, S.T.

**Title:** Substance Use and Risky Sexual Behavior Among Homeless and Runaway Youth.

**Source:** Journal of Adolescent Health 23(6): 378-388, 1998. (Journal Article: 11 pages)

**Abstract:** This article examines the relationships between substance use and risky sexual behavior in a sample of 327 homeless youth in Washington, DC. The aim was to characterize HIV-related risk behaviors of homeless youth, determine whether substance use is associated with risky sexual behavior in this population, and, if so, to explore explanations for this relationship. The results indicated that sexual activity with many partners, "survival" sex, and substance use were common. However, needle use was rare, and consistent condom use was evident in half the sample. Lack of motivation to use condoms, longer histories of sexual activity and homelessness, symptoms of drug dependency, not discussing HIV risks with a partner, and being female were associated with nonuse of condoms. The authors conclude homeless youth do use condoms, even within the context of substance use and casual sex. Results suggest that prevention and targeted intervention have had some positive effect on this population, but young homeless women are in need of targeted prevention (authors).

Order #: 7791

**Authors:** Bangsberg, D., Tulskey, J., Hecht, F., Moss, A.

**Title:** Protease Inhibitors in the Homeless.

**Source:** Journal of the American Medical Association 278(1): 63-65, 1997. (Journal Article: 3 pages)

**Abstract:** In spite of the apparent benefit, there is debate as to whether the new drugs to treat persons infected with HIV should be made available to the homeless and marginally housed. In this commentary, the authors suggest caution in prescribing protease inhibitors for homeless persons. Issues looked at are: (1) adherence to treatment is poor enough that effectiveness is in doubt; (2) poor adherence may lead not just to low effectiveness but also to problems of drug resistance; and (3) the costs of protease inhibitors might be better spent on other interventions. The authors make a series of recommendations for physicians who treat homeless and marginally housed persons.

Order #: 11500

**Authors:** Blank, M.B., Mandell, D.S., Aiken, L., Hadley, T.R.

**Title:** Co-occurrence of HIV and Serious Mental Illness Among Medicaid Recipients.

**Source:** Psychiatric Services 53(7): 868-873, 2002. (Journal Article: 6 pages)

**Abstract:** The authors estimated the treated period prevalence of HIV infection in the Medicaid population and the rate of HIV infection among persons with serious mental illness in that population. This cross-sectional study used Medicaid claims data and welfare recipient files for persons aged 18 years or older for fiscal years 1994 through 1996 in Philadelphia. Claims data were merged with welfare recipient files to calculate the treated period prevalence of serious mental illness, defined as a schizophrenia spectrum disorder or a major affective disorder, and HIV infection in the Medicaid population and the odds of receiving a diagnosis of HIV infection among those who had a diagnosis of serious mental illness. The treated period prevalence of HIV infection was .6 percent among Medicaid recipients who did not have a diagnosis of a serious mental illness and 1.8 percent among those who did. After sex, age, race, and time on welfare during the study period were controlled for, patients with a schizophrenia spectrum disorder were 1.5 times as likely to have a diagnosis of HIV infection, and patients with a diagnosis of a major affective disorder were 3.8 times as likely. The rate of HIV infection is significantly elevated among persons with serious mental illness. Further studies are needed to determine modes of transmission of HIV, special treatment needs, and effective strategies for reducing the risk of HIV infection (authors).

Order #: 8454

**Authors:** Booth, R.E., Zhang, Y., Kwiatkowski, C.F.

**Title:** The Challenge of Changing Drug and Sex Risk Behaviors of Runaway and Homeless Adolescents.

**Source:** Child Abuse and Neglect 23(12): 1295-1306, 1999. (Journal Article: 12 pages)

**Abstract:** This article assesses HIV-related drug and sex risk behaviors and evaluates factors associated with change in risk behaviors among runaway and homeless adolescents. To conduct the study, 244 street youth were recruited from a community drop-in center serving high-risk youth. Approximately half of the participants received training in a peer-based intervention, while the remaining subjects received no intervention. Subjects were interviewed at baseline, immediately following the intervention, and three months later. Runaways receiving the intervention significantly increased their knowledge about HIV. Knowledge and greater perceived chance for HIV were associated with high risk behavior. However, lower concern about HIV infection was also associated with high risk behavior. Despite the interventions success in increasing knowledge of HIV and AIDS, the association between knowledge, perceived likelihood of infection and high risk behaviors suggest that, without other alternatives, runaways will maintain their risks.

Order #: 2065

**Authors:** Brady, S.M., Carmen, E.H.

**Title:** AIDS Risk in the Chronically Mentally Ill: Clinical Strategies for Prevention.

**Source:** In Goldfinger, S.M. (ed.), Psychiatric Aspects of AIDS and HIV Infection. New Directions in Mental Health Services 48: 83-95, 1990. (Journal Article: 13 pages)

**Abstract:** This chapter examines sexuality, AIDS risk, and AIDS prevention among people with chronic mental illness. The authors discuss strategies for risk assessment and intervention with mentally ill subpopulations thought to be at particular risk. The chapter concludes with recommendations for AIDS prevention and research with chronically mentally ill persons (authors).

Order #: 12698

**Authors:** Bride, B., Real, E.

**Title:** Project Assist: A Modified Therapeutic Community for Homeless Women Living with HIV/AIDS and Chemical Dependency.

**Source:** Health and Social Work 28(2): 166-168, 2003. (Journal Article: 3 pages)

**Abstract:** This article describes a substance abuse treatment program for homeless women who abuse substances and are living with HIV/AIDS. A therapeutic community model was modified to meet the unique needs of this population, and incorporates a variety of HIV support and education services, and provides enhanced health services to address the multiple medical needs of this population. To date, limited treatment options have been available to address the unique issues of women who are homeless, chemically dependent, and HIV-positive (authors).

**Order #: 10626**

- Authors:** Burnam, M.A., Bing, E.G., Morton, S.C., Sherbourne, C., Fleishman, J.A., London, A.S., Vitiello, B., Stein, M., Bozzette, S.A., Shapiro, M.F.
- Title:** **Use of Mental Health and Substance Abuse Treatment Services Among Adults With HIV in the United States.**
- Source:** Archives of General Psychiatry 58(8): 729-736, 2001 (Journal Article: 7 pages)
- Abstract:** The need for mental health and substance abuse services is great among those with human immunodeficiency virus (HIV), but little information is available on services used by this population or on individual factors associated with access to care. Data are from the HIV Cost and Services Utilization Study, a national probability survey of 2864 HIV-infected adults receiving medical care in the United States in 1996. We estimated 6-month use of services for mental health and substance abuse problems and examined socioeconomic, HIV illness, and regional factors associated with use. We estimated that 61.4% of 231,400 adults under care for HIV used mental health or substance abuse services: 1.8% had hospitalizations, 3.4% received residential substance abuse treatment, 26.0% made individual mental health specialty visits, 15.2% had group mental health treatment, 40.3% discussed emotional problems with medical providers, 29.6% took psychotherapeutic medications, 5.6% received outpatient substance treatment, and 12.4% participated in substance abuse self-help groups. Socioeconomic factors commonly associated with poorer access to health services predicted lower likelihood of using mental health outpatient care, but greater likelihood of receiving substance abuse treatment services. Those with less severe HIV illness were less likely to access services. Persons living in the Northeast were more likely to receive services. The magnitude of mental health and substance abuse care provided to those with known HIV infection is substantial, and challenges to providers should be recognized. Inequalities in access to care are evident, but differ among general medical, specialty mental health, and substance abuse treatment sectors.

**Order #: 9894**

- Authors:** Carey, M.P., Braaten, L.S., Maisto, S.A., Gleason, J.R., Forsyth, A.D., Durant, L.E., Jaworski, B.C.
- Title:** **Using Information, Motivational Enhancement, and Skills Training to Reduce the Risk of HIV Infection for Low-Income Urban Women: A Second Randomized Clinical Trial.**
- Source:** Health Psychology 19(1): 1-10, 2000. (Journal Article: 10 pages)
- Abstract:** This randomized clinical trial evaluated an HIV-risk reduction (HIV-RR) intervention based on the information-motivation-behavioral skills model. At baseline, 102 women (M age=29 years; 88% African American) completed a survey regarding HIV-related knowledge, risk perceptions, behavioral intentions, and risk behavior. Participants were then assigned to either the HIV-RR intervention or a health-promotion control group. Post intervention and follow-up data indicated that women in the HIV-RR program enhanced their knowledge and strengthened their risk reduction intentions relative to controls. Moreover, HIV-RR women who expressed "imperfect" intentions also increased their condom use, talked more with partners about condom use and HIV testing, and were more likely to have refused unprotected sex. (authors).

## HIV/AIDS

**Order #: 10332**

**Authors:** Celentano, D.D., Dilorio, C., Hartwell T., Kelly, J., Magana, R., Maibach E., O'Leary, A., Pequegnat, W., Rotheram-Borus, M.J., Schilling, R.

**Title:** **Social-Cognitive Theory Mediators of Behavior Change in the National Institute of Mental Health Multisite HIV Prevention Trial.**

**Source:** Health Psychology 20(5): 369-376, 2001. (Journal Article: 9 pages)

**Abstract:** The National Institute of Mental Health Multisite HIV Prevention Trial was a trial of an intervention to reduce sexual HIV risk behaviors among 3706 low-income at-risk men and women at 7 U.S. research sites. The intervention, based on social-cognitive theory and designed to influence behavior change by improving expected outcomes of condom use and increasing knowledge, skills, and self-efficacy to execute safer sex behaviors, was effective relative to a control condition in reducing sexual risk behavior. At 3 months after completion of the intervention, measures of these potential mediators were higher in the intervention than in the control condition. Although the effect of the intervention on sexual risk behavior was significantly reduced when the variables were controlled statistically, supporting the hypothesis of their mediation of the intervention effect, most of the effect remained unexplained, indicating the influence of unmeasured factors on outcome.

**Order #: 10014**

**Authors:** Children's Hospital Los Angeles.

**Title:** **Facing the Challenge: Building Peer Programs for Street Youth.**

**Source:** Los Angeles, CA: Children's Hospital Los Angeles, 1996. (Videotape: 24 minutes)

**Abstract:** This video looks at the effectiveness of peer education and outreach in combating the spread of HIV. Young people, many of whom are hired right off the streets, are able to reach others while helping themselves stay on the right track. Participating programs are the Los Angeles Youth Network, LA Gay and Lesbian Center, Los Angeles Free Clinic, Harm Reduction Center, and Children's Hospital Los Angeles Div. of Adolescent Medicine.

**Available From:** Division of Adolescent Medicine, Children's Hospital Los Angeles, 4650 Sunset Boulevard #2, Los Angeles, CA 90027, (213) 669-4506, [www.childrenshospitala.org](http://www.childrenshospitala.org).

**Order #: 8458**

**Authors:** Clatts, M.C., Davis, W.R.

**Title:** **A Demographic and Behavioral Profile of Homeless Youth in New York City: Implications for AIDS Outreach and Prevention.**

**Source:** Medical Anthropology Quarterly 13(3): 365-374, 1999. (Journal Article: 10 pages)

**Abstract:** In this article, the authors construct a demographic and behavioral profile of the homeless youth population in New York City, particularly as behavioral patterns relate to risk associated with HIV infection. Structured survey interviews were conducted with 929 street youths between the ages of 12 and 23. Data show that street youths are involved in multiple high-risk behaviors, including chronic, high-risk drug abuse, as well as high-risk sexual behavior. The authors conclude that existing resources for prevention services targeted to this population are woefully inadequate relative to the scope of the population and the complexity of these youths' needs. The authors state that there is a urgent need to expand and integrate street outreach, shelter, drug treatment, and primary health services, and to do so within a unified service-delivery model.

**Order #: 7888**

**Authors:** Colson, P., Susser, E., Valencia, E.

**Title:** HIV and TB Among People who are Homeless and Mentally Ill.

**Source:** Psychosocial Rehabilitation Journal 17: 157-160, April 1994. (Journal Article: 4 pages)

**Abstract:** Homeless mentally ill residents of municipal shelters in New York City (NYC) are at particular risk for TB and HIV infection. The large number of active TB cases seen among homeless populations may be due to the confluence of higher than normal TB infection rates and weakened immune systems due to HIV. Other contributing factors include: (1) NYC is an epicenter of TB infection; (2) shelters have overcrowded, unsanitary conditions, as well as poor ventilation; and (3) many shelter residents have been incarcerated in NYC jails, another amplification point. This article looks at the Critical Time Intervention (CTI) Program at the Fort Washington Men's Shelter in NYC. The authors conclude that homeless mentally ill persons who are HIV positive and exposed to TB in shelters would benefit from prophylactic treatment to avoid developing active TB disease.

**Order #: 11830**

**Authors:** Cook, J.A., Razzano, L., Jayaraj, A., Meyers, M., Nathanson, F., Stott, M.A., Stein, M.

**Title:** HIV-Risk Assessment for Psychiatric Rehabilitation Clientele: Implications for Community-Based Services.

**Source:** Psychosocial Rehabilitation Journal 17(4): 105-115, 1994. (Journal Article: 11 pages)

**Abstract:** This article describes HIV-risk behaviors and services for members of a large psychosocial rehabilitation agency. Results of an all-agency HIV-risk factor screening of 757 clients with severe mental illness are presented. Rates of sexual activity, sexually transmitted disease history, intravenous drug use, and numbers of partners are reported along with the proportion of clients at risk from one or more of these factors. Prevention, education, and ongoing support services provided to these individuals are described and implications of the task force findings and their relevance to HIV issues for people with severe mental illnesses are discussed (authors).

**Order #: 11336**

**Authors:** Culhane, D.P., Gollub, E., Kuhn, R., Shpaner, M.

**Title:** The Co-occurrence of AIDS and Homelessness: Results from the Integration of Administrative Databases for AIDS Surveillance and Public Shelter Utilization in Philadelphia.

**Source:** Journal of Epidemiology of Community Health 55(7): 515-520, 2001. (Journal Article: 6 pages)

**Abstract:** Administrative databases from the City of Philadelphia that track public shelter utilization (n=44,337) and AIDS case reporting (n=7,749) were merged to identify rates and risk factors for co-occurring homelessness and AIDS. Multiple decrement life tables analyses were conducted, and logistic regression analyses used to identify risk factors associated with AIDS among the homeless, and homelessness among people with AIDS. People admitted to public shelters had a three year rate of subsequent AIDS diagnosis of 1.8 per 100 person years; nine times the rate for the general population of Philadelphia. Logistic regression results show that substance abuse history (OR=3.14), male gender (OR=2.05), and a history of serious mental disorder (OR=1.62) were significantly related to the risk for AIDS diagnosis among shelter users. Among people with AIDS, results show a three year rate of subsequent shelter admission of 6.9 per 100 person years, and a three year rate of shelter admission of 9%, three times the three year rate of shelter admission for the general population. Logistic regression results show that intravenous drug user history (OR=3.14); no private insurance (OR=2.93); black race (OR=2.82); pulmonary or extrapulmonary TB (OR=0.56) were all related to the risk for shelter admission. Homelessness prevention programs should target people with HIV risk factors, and HIV prevention programs should be targeted to homeless persons, as these populations have significant intersection. Reasons and implications for this intersection are discussed (authors).

Order #: 10048

**Authors:** De Rosa, C.J.; Montgomery, S.B.; Hyde, J.; Iverson, E.; Kipke, M.D.

**Title:** HIV Risk Behavior and HIV Testing: A Comparison of Rates and Associated Factors Among Homeless and Runaway Adolescents in Two Cities.

**Source:** AIDS Education and Prevention 13(2), 131-148, 2001. (Journal Article: 18 pages)

**Abstract:** This study examined differences in self-reported rates and predictors of HIV testing between homeless and runaway youths in San Diego (N=1,102) and Los Angeles (N=1,167). Youths aged 13 - 23 were recruited from agency and street sites using a stratified probability sampling design. Interviewers administered a structured survey instrument lasting 20 minutes, which assessed youths' involvement in HIV risk-related sexual and drug-use behaviors, contact with outreach workers, and other variables. Significantly more Los Angeles youths (78%) reported testing than did San Diego youths (52%;  $p < .001$ ). Multivariable analyses controlling for risk behaviors, knowing someone with HIV, and contact with outreach workers indicated that the higher rates of these factors in Los Angeles did not account for the difference in testing rates between the cities. Youths in Los Angeles were still 1.85 times as likely to be tested as San Diego youths ( $p < .001$ ), possibly a result of differing normative behavior and accessibility of testing services. (authors)

Order #: 8361

**Authors:** Dematteo, D., Major, C., Block, B., Coates, R., Fearon, M., Goldberg, E., King, S.M., Millson, M., O'Shaughnessy, M., Read, S.E.

**Title:** Toronto Street Youth and HIV/AIDS: Prevalence, Demographics, and Risks.

**Source:** Journal of Adolescent Health 25(5): 358-366, 1999 (Journal Article: 9 pages)

**Abstract:** The purposes of this study were: to identify HIV prevalence in Toronto street youth through paired blood and saliva specimens; to identify the HIV risk and prevention behaviors of street involved youth; and to identify demographic or other factors that may contribute to the risk of street youth becoming infected with HIV/AIDS in the future. This was a cross-sectional convenience study of street-involved youth aged 14-25 years. Fifteen of 695 (2.2%) youth tested positive for HIV infection. All were male, ranging in age from 18 to 25 years. Same and opposite sex, intravenous (IV) drug use, prostitution, and incarceration were risk factors associated with positive HIV test results. The rate of HIV infection was seven times greater for the group 20 years of age and older (20-25) compared to the younger group aged 14-19 years. The proportion testing positive for HIV from small cities, towns, and rural communities in Ontario was 40%; yet, they represented 23% of the study population. Unprotected (same and opposite) sex, IV drug use, prostitution and incarceration were linked to their HIV infections. The high level of mobility identified by street youth challenges governments, communities, and public health officials to develop appropriate prevention strategies and to carefully monitor the spread of HIV infection in this vulnerable population. (authors)

Order #: 2175

**Authors:** Empfield, M., Cournos, F., Meyer, I., McKinnon, P.K., Horwath, E., Silver, M., Schrage, H., Herman, R.

**Title:** HIV Seroprevalence Among Homeless Patients Admitted to a Psychiatric Inpatient Unit.

**Source:** American Journal of Psychiatry 150(1): 47-52, 1993. (Journal Article: 6 pages)

**Abstract:** This article is based on a study of HIV seroprevalence among hospitalized homeless patients who are mentally ill. Over a two-year period the authors collected discarded blood samples from patients admitted to a psychiatric unit designated specifically for the care of individuals with serious mental illnesses removed from the streets of New York City. Results indicate that one in every 16 patients admitted to the unit was HIV positive. Characteristics most strongly associated with seropositivity were being under the age of 40 and intravenous drug use. The authors suggest that homeless individuals who are mentally ill require outreach efforts in order to reduce the risk of acquiring or transmitting HIV (authors).

**Order #:** 8357

**Authors:** Ennett, S.T., Friedman, S.L., Bailey, S.L.

**Title:** HIV-Risk Behaviors Associated with Homeless Characteristics in Youth.

**Source:** Journal of Adolescent Health 25(5): 344-353, 1999. (Journal Article: 344 pages)

**Abstract:** The purpose of this study was to examine characteristics of youth homelessness associated with engaging in risk behaviors for human immunodeficiency virus (HIV). The sample included 288 currently homeless or runaway Washington, DC, youth aged 14-21 years. Measures were self-reported homelessness characteristics, unsafe sexual behavior, injection drug use, and background characteristics. Both male (n=140) and female (n=148) participants reported high rates of unsafe sexual behavior, but low rates of injection drug use. HIV risk was significantly associated in bivariate analyses with severity of homelessness circumstances, the duration of homelessness, and specific reasons for being homeless. In addition, sexual victimization and older age were associated with increased HIV risk. In multivariable models, a smaller set of these homelessness characteristics remained significant independent correlates and explained a substantial amount of the variation in the HIV risk indices for both males and females. The results contribute to greater theoretical understanding of the characteristics of homelessness associated with increased risk of HIV infection within this vulnerable population of youth. The associations between homelessness characteristics and HIV risk suggest the need for HIV prevention efforts to focus directly on ameliorating the homelessness circumstances of youth. (authors)

**Order #:** 12396

**Authors:** Essock, S.M.

**Title:** Risk Factors for HIV, Hepatitis B and Hepatitis C Among People with Severe Mental Illness.

**Source:** Psychiatric Services 54(6): 836-841, 2003. (Journal Article: 6 pages)

**Abstract:** This article discusses the elevated risk of contracting HIV, hepatitis B and hepatitis C for people with severe mental illness, compared to the general population. The authors examine factors that are most predictive of serologic status among persons with severe mental illness. A total of 969 persons with severe mental illness from five sites in four states were approached to take part in an assessment involving testing for blood-borne infections. Sociodemographic characteristics, substance use, risk behaviors for sexually transmitted diseases, and health care are discussed. The article concludes that risk factors increase the likelihood of infection, and that clinicians should be attentive to these factors so as to encourage appropriate testing, counseling and treatment (authors).

**Order #:** 9965

**Authors:** Fanlight Productions Media Library.

**Title:** The Drop in Group: An AIDS Risk and Prevention Program for the Mentally Ill.

**Source:** Boston, MA: Fanlight Productions, 1992. (Videotape: 24 minutes)

**Abstract:** This Academy Award winning video (for best documentary short) presents a drop-in group model AIDS prevention designed for individuals with serious mental illnesses. Under the direction of clinical staff, participants learn about AIDS prevention and practice skill to reduce their risk for getting the HIV virus. A training manual provides guidelines for preparing and facilitating one-hour drop-in group sessions on AIDS risk and prevention.

**Available From:** Fanlight Productions, 4196 Washington Street, Suite 2, Boston, MA 02131, (617) 469-4999, orders@fanlight.com, www.fanlight.com.(COST: \$195/purchase; \$60-70/rent).

**Order #: 10951**

**Authors:** Farber, E.W., McDaniel, J.S.

**Title:** **Clinical Management of Psychiatric Disorders In Patients with HIV Disease.**

**Source:** Psychiatric Quarterly 73(1): 5-16, 2002 (Journal Article: 12 pages)

**Abstract:** HIV disease presents considerable challenges that can affect adjustment and health-related behaviors. This article provides an overview of clinical considerations in the treatment of comorbid psychiatric disorders and problems in adjustment in HIV patients. First, the research literature is reviewed with respect to biomedical, intrapersonal, and psychosocial factors associated with HIV-related psychological adjustment and psychiatric complications. Next, a brief description is presented regarding prevalence and types of co-occurring psychiatric disorders seen in HIV patients. The article concludes with a discussion of clinical assessment and treatment considerations for psychiatric clinicians who work with HIV patients (authors).

**Order #: 7254**

**Authors:** Goldfinger, S.M., Susser, E., Roche, B.A., Berkman, A.

**Title:** **HIV, Homelessness, and Serious Mental Illness: Implications for Policy and Practice.**

**Source:** Washington, DC: Center for Mental Health Services, 1998. (Report: 40 pages)

**Abstract:** This paper provides an overview of available epidemiological data, reviews the literature on the interface between HIV/AIDS, homelessness, and mental illness, and explores what is known about sexuality and high-risk behaviors in this population. It examines risk reduction programs that have been developed and implemented with homeless people who have serious mental illnesses. Finally, it makes recommendations for appropriate public policy and future research directions (authors).

**Available From:** National Resource Center on Homelessness and Mental Illness, Policy Research Associates, Inc., 345 Delaware Avenue, Delmar, NY 12054, (800) 444-7415, [www.nrchmi.samhsa.gov](http://www.nrchmi.samhsa.gov).

**Order #: 6423**

**Authors:** Goodman, E., Berecochea, J.E.

**Title:** **Predictors of HIV Testing Among Runaway and Homeless Adolescents.**

**Source:** Journal of Adolescent Health 15(7): 566-572, 1994. (Journal Article: 7 pages)

**Abstract:** This article describes a study that determined demographic characteristics and risk profiles of runaway and homeless adolescents who had obtained an HIV test and compared them with those who had not been tested. Most subjects were 16 years or older, white, sexually active, and heterosexual. Twenty-three percent reported a previous sexually transmitted disease; 27% had used injection drugs; and 54% had been HIV antibody tested. Results demonstrate that many runaway and homeless adolescents have obtained an HIV antibody test and that those with known risk factors are more likely to have been tested. The data support the need for community-based expansion of HIV related services for homeless youth (authors).

## HIV/AIDS

**Order #: 7193**

**Authors:** Goodman, L.A., Fallot, R.D.

**Title:** **HIV Risk-Behavior in Poor Urban Women with Serious Mental Disorders: Association with Childhood Physical and Sexual Abuse.**

**Source:** American Journal of Orthopsychiatry 68(1): 73-83, 1998 (Journal Article: 11 pages)

**Abstract:** In this article associations between childhood sexual and physical abuse and HIV-related risky behavior were examined among low-income, urban women with severe mental disorders. Interviews were conducted with 99 women between August 1993 and June 1994 and were followed with surveys completed by their case managers. Early sexual abuse was found to be related to adult sexual and physical assault, alcohol and cocaine abuse, and prostitution. Childhood physical abuse was related to an adult physical assault and alcohol abuse. The authors concluded that the findings highlight the importance of making HIV risk-reduction programs a part of integrated services that address a full range of psychosocial needs (authors).

**Order #: 1576**

**Authors:** Health Care for the Homeless Information Resource Center.

**Title:** **HIV/AIDS Among Homeless People.**

**Source:** Delmar, NY: Policy Research Associates, 2001. (Bibliography: 76 pages)

**Abstract:** This annotated bibliography produced by the Health Care for the Homeless Information Resource Center, contains references to journal articles and reports pertaining to HIV/AIDS and the homeless population.

**Available From:** Health Care for the Homeless Information Resource Center, Policy Research Associates, 345 Delaware Avenue, Delmar, NY 12054, (888) 444-7415, [www.bphc.hrsa.gov/hchirc](http://www.bphc.hrsa.gov/hchirc).

**Order #: 6352**

**Authors:** Health Care for the Homeless.

**Title:** **Preventing the Spread of HIV and Other Sexually Transmitted Diseases Among People Who Are Homeless: Train the Trainer.**

**Source:** #Error

**Abstract:** This HIV prevention education curriculum is presented as a guide to trainers who are working with people who are homeless. This curriculum was developed at Health Care for the Homeless, Inc., to be used by their community health outreach nursing team for their peer training program in shelters.

**Order #: 6531**

**Authors:** Hwang, S., Orav, J., O'Connell, J., Lebow, J., Brennan, T.

**Title:** **Causes of Death in Homeless Adults in Boston**

**Source:** Annals of Internal Medicine 126(8): 665-628, 1997. (Journal Article: 4 pages)

**Abstract:** This article describes a study of 17,292 adults seen by the Boston Health Care for the Homeless Program from 1988 to 1993. Its objective was to ascertain causes of death in a group of homeless persons. The results showed that the leading causes of death varied by age group: (1) homicide - men 18-24; (2) HIV/AIDS - persons 25-44; and (3) heart disease and cancer - persons 45-64. The authors conclude the most common causes of death among homeless adults who have contact with clinicians vary by age group and efforts to reduce the rate of death among homeless persons should focus on these causes (authors).

## HIV/AIDS

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- Authors:** Jersey City Family Health Center.
- Title:** **Habits and Choices: Addiction in the Age of AIDS.**
- Source:** Jersey City, NJ: Jersey City Family Health Center, 1992. (Videotape: 29 minutes)
- Abstract:** This video is a health education tool in which persons who were addicted to drugs and alcohol present a spectrum of responses to the following issues: How do you become addicted? What is the relationship between addiction and HIV infection? How do you decide to take the test for HIV antibodies? How do you respond to results? How are you managing to live with HIV? The participants in the video are currently or formerly homeless people and represent the "hard-core" of users. They are largely people of color, and their responses reflect their experiences of living in the inner city.
- Available From:** Jersey City Family Health Center, 114 Clifton Place, Jersey City, NJ 07304, (201) 434-1316.
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- Order #: 9959**
- Authors:** Johnson, T.P., Aschkenasy, J.R., Herbers, M.R., Gillenwater, S.A.
- Title:** **Self-Reported Risk Factors For AIDS Among Homeless Youth.**
- Source:** AIDS Education and Prevention 8(4): 308-322, 1996. (Journal Article: 15 pages)
- Abstract:** The authors describe a study which assessed HIV risk behaviors in a sample of homeless youth in a large urban area and examined factors associated with these behaviors. Self-reported behaviors were assessed via interviews with 196 homeless youth in Chicago in all 10 urban shelters serving this group and in five street locations. Overall, 83.7% reported at least one of these risk factors: multiple sex partners; high risk sexual partners; inconsistent condom use; history of sexually transmitted disease; anal sex; prostitution; and/or intravenous drug use. An index of these behaviors was associated with being male, having unmet personal needs, being interviewed in street locations, and having a history of sexual abuse. Findings suggest that strategies that may decrease risk behaviors among homeless youth include the elimination of their need to rely on illicit activities for income, provision of basic needs, education regarding existing services, increased outreach efforts, and early identification of and protection from childhood sexual abuse (authors).
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- Order #: 6386**
- Authors:** Kilbourne, A.M., Herndon, B., Andersen, R.M., Wenzel, S.L., Gelberg, L.
- Title:** **Psychiatric Symptoms, Health Services, and HIV Risk Factors Among Homeless Women.**
- Source:** Journal of Health Care for the Poor and Underserved 13(1): 49-65, 2002. (Journal Article: 17 pages)
- Abstract:** The authors determined whether psychiatric symptoms and lack of health and/or social services contacts were associated with HIV risk behaviors among a probability sample of homeless women. Women were interviewed regarding socioeconomic indicators, psychiatric symptoms, health, and/or social services contacts, and past-year HIV risk behaviors. Overall, 8 percent of the women injected drugs, 64 percent engaged in unprotected sex, and 22 percent traded sex. Multiple logistic regression results revealed that substance abuse was positively associated with injection drug use and trading sex, women attending self-help meetings for substance abuse were also more likely to trade sex. Homeless women who are substance abusers are vulnerable to HIV risk behaviors. Risk reduction interventions for homeless women should be implemented through substance abuse and intensive case management programs (authors).
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- Order #: 11292**

## HIV/AIDS

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**Order #: 12980**

**Authors:** Klinkenberg, R., Caslyn, R., Morse, G., Yonker, R., McCudden, S., Ketema, F., Constantine, N.

**Title:** **Prevalence of HIV, Hepatitis B, and Hepatitis C Among Homeless Persons with Co-Occurring Severe Mental Illness and Substance Use Disorders.**

**Source:** Comprehensive Psychiatry 44(4): 293-302, 2003. (Journal Article: 9 pages)

**Abstract:** This study was undertaken to determine the prevalence of human immunodeficiency virus (HIV), hepatitis B virus (HBV), and hepatitis C virus (HCV) among homeless persons with co-occurring severe mental illness (SMI) and substance use disorders and to determine associated risk factors. As part of a longitudinal study of the effectiveness of integrated treatment for homeless persons with SMI and substance abuse or dependence, serological testing was performed to ascertain the prevalence of HIV, HBV, and HCV. At baseline, 6.2% of participants were HIV-positive. Nearly one third of participants had evidence of prior exposure to HBV, and 30% were antibody positive for HCV. About 44% of participants had a reactive test for either HBV or HCV. Having a reactive test was strongly associated with substance use, especially with a history of injection drug use. A significant threat exists to the health and well-being of homeless person with SMI due to high prevalence of blood-borne pathogens. Mental health providers need to play a proactive role in the identification of health-related needs and to assist with access to general health services for persons with SMI (authors).

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**Order #: 7296**

**Authors:** Larson, M., Schatz, M.

**Title:** **HIV Prevention Strategies with Homeless and Street Youth.**

**Source:** In Moore, M.K., and Forst, M.L. (eds.), AIDS Education: Reaching Diverse Populations. Westport, CT: Praeger Publishers, 1996. (Book Chapter: 18 pages)

**Abstract:** This book chapter looks at ways to prevent HIV infection among homeless youth by providing education that is accessible and which promotes behavior change. To accomplish this, it is necessary to understand and address the barriers that are intrinsic to the task. The authors examine various types of street-based outreach HIV prevention education including; one-on-one, spontaneous street groups, formal street groups, drop-in centers, HIV prevention activities, and programs.

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**Order #: 8911**

**Authors:** Law Offices of Goldfarb and Lipman.

**Title:** **Between the Lines: A Question and Answer Guide on Legal Issues in Supportive Housing - National Edition.**

**Source:** New York, NY: Corporation for Supportive Housing, 2001. (Guide: 226 pages)

**Abstract:** This document is a guide to legal issues in developing and operating supportive housing for people who are homeless or at serious risk of homelessness, and struggle with the challenges of mental illness, substance abuse, and HIV/AIDS. This manual offers some basic information about the laws that pertain to supportive housing and sets out ways to identify and think through issues so as to make better use of professional counsel. It also offers reasonable approaches to resolve common dilemmas.

**Available From:** Corporation for Supportive Housing, 50 Broadway, 17th Floor, New York, NY 10004, (212) 986-2966, [www.csh.org](http://www.csh.org)

## HIV/AIDS

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**Order #: 3445**

**Authors:** Layton, M.C., Cantwell, M.F., Dorsinville, G.J., Valway, S.E., Onorato, I.M. and Frieden, T.R.

**Title:** **Tuberculosis Screening Among Homeless Persons with AIDS Living in Single-Room-Occupancy Hotel**

**Source:** American Journal of Public Health 85(11): 1556-1559, 1995. (Journal Article: 4 pages)

**Abstract:** Shelters and other congregate facilities remain endemic sites of tuberculosis. In New York City, the Division of AIDS Services provides housing support to homeless persons with AIDS. Because of a shortage of available housing, clients are temporarily placed in commercial single-room-occupancy (SRO) hotels. This study evaluated a tuberculosis screening program used at the SRO for the AIDS Services clients. Clients were screened using several methods including: (1) cross matching clients with the New York City Tuberculosis Registry; (2) interviewing for tuberculosis history; (3) skin testing; and (4) chest radiography. Findings indicate that the most useful screening tools were the cross-match results from the registry and the interview.

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**Order #: 6884**

**Authors:** Leake, B., Nyamathi, A., Gelberg, L.

**Title:** **Reliability, Validity, and Composition of a Subset of the Centers for Disease Control and Prevention Acquired Immunodeficiency Syndrome Knowledge Questionnaire in a Sample of Homeless and Impoverished Adults**

**Source:** Medical Care 35(8): 747-755, 1997. (Journal Article: 9 pages)

**Abstract:** This article describes a study that attempted to measure AIDS-related knowledge among impoverished populations in order to evaluate the impact of educational interventions. The authors used a sample of women and their significant others or close friends in nine homeless shelters and 11 residential drug recovery programs in the Skid Row area of Los Angeles from 1991-1993. Data was collected from 486 adults who were predominantly African-American prior to delivery of well-established, culturally sensitive AIDS educational intervention. A subset of 334 participants were interviewed six months later. Results found the measures to have face validity, and support for convergent validity was also found. Further, even though AIDS knowledge was relatively high, all measures showed marked improvement following the receipt of AIDS-related education. The authors discuss implications for assessing AIDS knowledge and the efficacy of AIDS education programs in vulnerable populations (authors).

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**Order #: 7085**

**Authors:** Lebow, J., O'Connell, J., Oddleifson, S., Gallagher, K.M., Seage, G.R., Freedberg, K.A.

**Title:** **AIDS Among the Homeless of Boston: A Cohort Study.**

**Source:** Journal of Acquired Immune Deficiency Syndromes and Human Retrovirology 8: 292-296, 1995. (Journal Article: 5 pages)

**Abstract:** This study compares demographics, risk behaviors, AIDS-defining diagnoses, and survival between homeless and housed persons with AIDS in Boston from 1983 to 1991. The retrospective cohort study used chart review to identify homeless AIDS cases and data from the Massachusetts AIDS Surveillance Program for comparison of homeless and nonhomeless cases. Seventy-two homeless and 1,536 nonhomeless Boston residents were reported to have AIDS between Jan. 1, 1983, and July 1, 1991. Homeless persons with AIDS were more likely to be African American or Latino (81% vs. 39%) and have IV drug use as a risk behavior (75% vs. 19%). The AIDS-defining diagnoses among the homeless were more commonly disseminated Mycobacterium tuberculosis (9% vs. 2%) and esophageal candidiasis (17% vs. 9%). These differences were not seen when the populations were stratified by IV drug use. No significant difference in survival between the homeless and nonhomeless cohorts was found. Homeless individuals with HIV are significantly different than housed persons, and at greater risk of invasive opportunistic infections. Appropriate clinical strategies can be developed to provide needed care to homeless persons with HIV.

**Order #: 11642**

**Authors:** Levounis, P., Galanter, M., Dermatis, H., Hamowy, A., De Leon, G.

**Title:** **Correlates of HIV Transmission Risk Factors and Considerations for Interventions in Homeless, Chemically Addicted and Mentally Ill Patients.**

**Source:** Journal of Addictive Diseases 21(3): 61-72, 2002. (Journal Article: 12 pages)

**Abstract:** A study was conducted to ascertain correlates of HIV high risk behaviors and attitudes toward HIV. A questionnaire was administered to 103 men living in modified therapeutic community (TC) for men who are homeless, chemically addicted and mentally ill. The psychiatric diagnoses of the sample population included psychotic disorders, depressive disorders, and bipolar disorders. Forty-two percent reported that their primary substance of abuse was cocaine and another 40% named alcohol as the substance to which they were most addicted. Two logistic regression analyses were conducted, one with needle sharing as the outcome measure and one with endorsement of the need for lifestyle changes to reduce risk of HIV transmission. Cocaine users were 3.4 times more likely to have shared needles than the rest of the sample. Patients who had a history of sexually transmitted diseases were 17 times more likely to endorse the need for lifestyle changes. The level of HIV transmission knowledge was unrelated to HIV risk behaviors or attitudes (authors).

**Order #: 8384**

**Authors:** Lewis, J.R., Boyle, D.P., Lewis, L.S., Evans, M.

**Title:** **Reducing AIDS and Substance Abuse Risk Factors Among Homeless, HIV-Infected, Drug-Using Persons.**

**Source:** Research on Social Work Practice 10(1): 15-33, 2000. (Journal Article: 19 pages)

**Abstract:** This article examines the impact of a comprehensive HIV education, housing supports, and 12-step recovery program in a day treatment program for homeless persons infected with HIV. Participants' knowledge of HIV and substance use behaviors was assessed for a group of new clients and for a group of clients enrolled for three months by questionnaire. Continuation of high-risk sexual and substance use behaviors was assessed using this approach. Success in maintaining housing and 12-step recovery was assessed using a retro-positive chart review on a separate group of past participants. Statistically significant positive changes in participants' knowledge of HIV and substance use and a decrease in self-reported high-risk behaviors were found. The chart review also indicated positive changes in housing stability and substance abuse recovery. (authors)

**Order #: 2362**

**Authors:** Lieberman, B., Chamberlain, D.P.

**Title:** **Breaking New Ground: Developing Innovative AIDS Care Residences.**

**Source:** Seattle, WA: AIDS Housing of Washington, 1993. (Book: 311 pages)

**Abstract:** Through its practical advice on developing AIDS care residences, this book addresses the AIDS crisis, which is intertwined with homelessness. With an introduction that explains how individuals with AIDS are cared for, subsequent chapters focus on the planning, licensing, financing, construction, and operation of a facility. The material presented on housing development would be useful to providers of special needs housing, in general. The authors draw heavily on their experience in developing two AIDS residences and stress the importance of good planning in a project's ultimate success.

**Available From:** AIDS Housing of Washington, 2014 East Madison, Suite 200, Seattle, WA 98122, (206) 322-9444, info@aidshousing.org, www.aidshousing.org.

**Order #: 11777**

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**Authors:** Linsk, N.L., Mitchell, C.G., Despotos, J., Cook, J., Razzano, L., Grey, D., Wolf, M.

**Title:** **Evaluating HIV Mental Health Training: Changes in Practice and Knowledge for Social Workers and Case Managers.**

**Source:** Health and Social Work 27(1): 67-70, 2002. (Journal Article: 4 pages)

**Abstract:** This article reports outcomes of an evaluation of an HIV training program entitled "Fundamentals of Mental Health and HIV/AIDS." The program was targeted to a broad array of health and mental health providers in inpatient and outpatient settings from 1996 through 1998. The article provides an overview of the curriculum and evaluation and identifies similarities and differences in service delivery patterns between the social workers and the case managers-counselors. Implications for social work practice, education, and training are also discussed (authors).

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**Order #: 11832**

**Authors:** Liverpool, J., McGhee, M., Lollis, C., Beckford, M., Levine, D.

**Title:** **Knowledge, Attitudes, and Behavior of Homeless African-American Adolescents: Implications for HIV/AIDS Prevention.**

**Source:** Journal of the National Medical Association 94(4): 257-263, 2002. (Journal Article: 7 pages)

**Abstract:** This study describes the knowledge of HIV/AIDS, attitudes about condom use, and the sexual behavior of African American adolescents who reside in a children's emergency homeless shelter. Of the 37 African-American male and female adolescents questioned, HIV/AIDS knowledge and attitudes about condoms were comparable to those of other adolescents described in the literature. The authors conclude that the knowledge, attitudes, and sexual behavior of homeless, African-American adolescents should be examined to develop and implement appropriate programs to address the specific needs of this population (authors).

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**Order #: 8079**

**Authors:** Luna, G.C., Rotheram-Borus, M.J.

**Title:** **Street Youth and the AIDS Pandemic.**

**Source:** AIDS Education and Prevention (S): 1-13, 1992. (Journal Article: 13 pages)

**Abstract:** The authors state that the AIDS pandemic is inextricably linked to homelessness and is a particularly devastating threat to the welfare of the world's disenfranchised youth, as they are continually forced into multiple HIV-related high risk situations and behaviors. Specific recommendations regarding clinical care, prevention programs, research, and the implications for policy and legislative action are discussed in relation to reducing the incidences and impact of HIV. The authors state the goal of this paper is not to present a comprehensive literature review, but to put forth a variety of relevant facts, references, and resources on an issue necessitating international public health attention and initiatives (authors).

**Order #: 8843**

**Authors:** MacKellar, D.A., Valleroy, L.A., Hoffmann, J.P., Glebatis, D., LaLota, M., McFarland, W., Westerholm, J., Jansenn, R.S.

**Title:** **Gender Differences in Sexual Behaviors and Factors Associated with Nonuse of Condoms Among Homeless and Runaway Youths.**

**Source:** AIDS Education and Prevention 12(6): 477-491, 2000. (Journal Article: 15 pages)

**Abstract:** This article evaluates gender-specific factors associated with nonuse of condoms among homeless and runaway youths (HRYs) and explores gender differences in background experiences, psychosocial functioning, and risk behaviors among HRYs from four U.S. metropolitan areas. Of 879 sexually active HRYs sampled, approximately 70% reported unprotected sexual intercourse during a six-month period, and nearly a quarter reported never using condoms in the same period. Among males and females, having only one sex partner in the previous six months had the strongest association with nonuse of condoms. Among males, nonuse was also associated with having ever caused pregnancy, frequent marijuana use, prior physical victimization, and low self-control and sociability. Among females, nonuse was associated with knowledge of HIV status, prior sexual victimization, low social support, and infrequent marijuana use. These findings highlight the ongoing need for HIV prevention services for HRYs. Implications for the scope and content of these services are discussed (authors).

**Order #: 7450**

**Authors:** Martinez, T.E., Gleghorn, A., Marx, R., Clements, K., Bowman, M., Katz, M.H.

**Title:** **Psychosocial Histories, Social Environment, and HIV Risk Behaviors of Injection and Noninjection Drug Using Homeless Youths.**

**Source:** Journal of Psychoactive Drugs 30(1): 1-10, 1998. (Journal Article: 10 pages)

**Abstract:** This article examines a study on the prevalence of HIV high-risk sexual and drug use behavior in a population of homeless youth. The authors recruited 186 homeless, runaway, and street youth in three northern California cities using systematic street-based sampling methods, and assessed psychosocial histories, currently daily activities, and sexual and drug-related risk behaviors using qualitative and quantitative techniques. Youths reported high lifetime rates of injection drug use (45%), recent drug and alcohol abuse (100%), and current homelessness (84%). Injection drug using youths were more likely than noninjection drug using youth to report traumatic psychosocial histories, including parental substance use and forced institutionalization, use of alcohol and other noninjection drugs, a history of survival sex, and the use of squats or abandoned buildings as shelter. The authors state that these findings underscore the need for multifaceted service and prevention programs to address the varied needs of these high-risk youth (authors).

**Order #: 10952**

**Authors:** McKinnon, K., Cournos, F., Herman, R.

**Title:** **HIV Among People With Chronic Mental Illness.**

**Source:** Psychiatric Quarterly 73(1): 17-31, 2002. (Journal Article: 15 pages)

**Abstract:** Rates of HIV infection, STDs, and sexual and drug-use risk behaviors are high among people with severe mental illness. Clinicians often are in the best position to connect psychiatric patients to the particular HIV-related services they need. These may include prevention interventions, risk assessment, antibody test counseling, and medical care. This review article describes the AIDS epidemic and its underpinnings in this population in an effort to help clinicians to recognize when their patients are at risk for acquiring or transmitting the virus and to intervene appropriately and effectively with an array of relevant services. The importance of training to enhance clinicians' skills and comfort in delivering these services is emphasized. The lives and well-being of psychiatric patients are threatened by the AIDS epidemic, and there is clinicians can do to minimize the devastating impact of HIV and AIDS on clients in hospitals, clinics, and other psychiatric treatment settings (authors).

**Order #: 7278**

**Authors:** Metsch, L.R., McCoy, C.B., McCoy, H.V., Schultz, J.M., Lai, S., Weatherby, N.L., McAnany, H., Correa, R., Anwyl, R.S.

**Title:** **HIV-Related Risk Behaviors and Seropositivity Among Homeless Drug-Abusing Women in Miami, Florida.**

**Source:** Journal of Psychoactive Drugs 27(4): 435-46, 1995. (Journal Article: 12 pages)

**Abstract:** This article examines the multifaceted interactions among homelessness, HIV, substance abuse, and gender. Data were collected on 1,366 chronic drug users using a nationally standardized validated instrument within the Miami CARES project of a multisite federally funded program. HIV testing accompanied by pretest and post-test counseling was conducted on-site by certified phlebotomists and counselors. In addition to descriptive analyses and corresponding tests of significance. Logistic regression analyses were used to clarify the complex associations between the outcome variables of homelessness and HIV, recognizing difficulties of determining temporal sequence. HIV infection was found to be 2.35 times more prevalent among homeless women than homeless men. The findings indicate that among women, homelessness and HIV have a highly interactive effect increasing the vulnerability of this population and thus rendering them an extremely important priority population on which to focus public health efforts and programs (authors).

**Order #: 13158**

**Authors:** Meyerson, B., Chu, B., Mills, V.

**Title:** **State Agency Policy and Program Coordination in Response to the Co-Occurrence of HIV, Chemical Dependency, and Mental Illness.**

**Source:** Public Health Reports 118(5): 408-414, 2003. (Journal Article: 7 pages)

**Abstract:** This study sought to establish a conservative and initial understanding of state HIV, substance abuse, and mental health agency coordination of policy and program in response to the co-occurrence of HIV, chemical dependency, and mental illness. Estimation of coordination was accomplished through the comparison of three surveys conducted among state substance abuse directors (1998), state AIDS directors (1999), and state mental health directors (2000). Data from 38 states were reviewed. According to the authors, the most frequently reported state agency activities included coordinating funding, engaging in integrative planning activities, and conducting staff cross-training. When compared for association with state characteristics, coordination among state agencies was found to be associated with Early Intervention Services (EIS) designation, higher rates of AIDS generally, higher rates of AIDS among African Americans, and higher rates of AIDS among Hispanic populations. Given the limitations of comparing three disparate surveys, the authors determined the estimate of interagency coordination to be conservative and preliminary. They conclude that while this study was useful as an initial step toward identifying state interagency policy and program coordination in response to the co-occurrence of HIV, chemical dependency, and mental illness, there were methodological challenges that should be addressed in future studies of state agency coordination. Several recommendations were advanced (authors).

**Order #: 9899**

**Authors:** Moon, M.W.; McFarland, W.; Kellogg, T.; Baxter, M., Katz, M.H.; MacKellar, D.; Valleroy, L.A.

**Title:** **HIV Risk Behavior of Runaway Youth in San Francisco: Age of Onset and Relation to Sexual Orientation.**

**Source:** Youth and Society 32(2): 184-201, 2000. (Journal Article: 18 pages)

**Abstract:** The purpose of this study was to describe HIV risk behavior among runaway youth in San Francisco by age at onset and sexual orientation. Participants were a cross-sectional sample (N=334) of male and female youth aged 12 to 21 years seeking health care at two clinics serving runaway youth. Gay/lesbian/bisexual youth reported higher levels and earlier onset of sexual and drug-using behavior compared with their heterosexual counterparts. Gay/lesbian/bisexual youth in this sample are at exceptionally high risk for HIV infection (authors).

## HIV/AIDS

**Order #: 1852**

**Authors:** National Association of State Mental Health Program Directors.

**Title:** **PATH Finder Report: HIV Infection and Homeless Mentally Ill Persons.**

**Source:** Washington, DC: National Association of State Mental Health Program Directors, 1992. (Newsletter: 6 pages)

**Abstract:** This issue concentrates on the special issues surrounding HIV infection and homeless mentally ill persons. According to researchers, despite the lack of hard data, service providers in the field state that their experience suggests that HIV exposure is higher in people who are homeless than in the general population and higher still among people who are homeless and mentally ill. The newsletter discusses the critical importance of teaching risk reduction and highlights several programs serving this population including the New York and the Boston NIMH McKinney Demonstration Projects and programs located in the State of Tennessee.

**Available From:** National Association of State Mental Health Program Directors, 66 Canal Center Plaza, Suite 302, Alexandria, VA 22314, (703) 739-9333, [www.nasmhpd.org](http://www.nasmhpd.org).

**Order #: 3058**

**Authors:** National Coalition for the Homeless.

**Title:** **Fighting to Live: Homeless People With AIDS.**

**Source:** New York, NY: National Coalition for the Homeless, 1990. (Report: 127 pages)

**Abstract:** To obtain a grass roots assessment of the current and projected need for housing and related support services for homeless people with HIV-related illnesses, the AIDS Project of the National Coalition for the Homeless surveyed shelter providers, AIDS organizations, homeless health care workers and public officials in 26 communities and states around the nation. Model public and private programs created to meet the special needs of homeless men, women, children and families living with AIDS are examined as well.

**Order #: 13267**

**Authors:** National Coalition for the Homeless.

**Title:** **HIV/AIDS and Homelessness.**

**Source:** Washington, DC: National Coalition for the Homeless, 1999. (Fact Sheet: 3 pages)

**Abstract:** This fact sheet discusses the lack of affordable housing for people living with HIV/AIDS. The authors identify job loss, hospitalization and discrimination as contributing factors to the poverty, and homelessness, this population face. Prevalence and policy recommendations are also discussed. Additional resources are included (authors).

**Available From:** National Coalition for the Homeless, 1012 Fourteenth Street, NW, #600, Washington, DC 20005-3471, (202) 737-6444, [www.nationalhomeless.org](http://www.nationalhomeless.org).

**Order #: 1740**

**Authors:** National Commission on AIDS.

**Title:** **Housing and the HIV/AIDS Epidemic.**

**Source:** Washington, DC: National Commission on AIDS, 1992. (Report: 14 pages)

**Abstract:** The National Commission on AIDS held hearings in Boston on March 2 and 3, 1992, to examine housing issues and the HIV/AIDS epidemic. This report is based on testimony of hundred of witnesses who have appeared before the Commission and on site visits made. It describes the effort to respond to one part of the overall housing crisis in America today - the lack of affordable and appropriate housing for people living with HIV disease. It emphasizes the need for a continuum of housing models for people in different stages of HIV infection and disease, and it includes recommendations for action to address this crisis (authors).

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**Order #: 10621**

**Authors:** National Network for Youth.

**Title:** **Issue Brief: HIV Prevention for Two Populations of Youth in High-Risk Situations - Homeless Youth and Sexual Minority Youth.**

**Source:** Washington, DC: National Network for Youth, 1998. (Literature Review: 28 pages)

**Abstract:** This publication is a review of the literature concerning HIV prevention for homeless and sexual minority youth. The review focuses on statistical studies, and presents tables outlining the major findings of these studies.

**Available From:** National Network for Youth, 1319 F Street, NW, 4th Floor, Washington DC 20004, (202) 783-7949, [www.nn4youth.org](http://www.nn4youth.org).

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**Order #: 8080**

**Authors:** Nyamathi, A., Flaskerud, J., Keenan, C., Leake, B.

**Title:** **Effectiveness of a Specialized vs. Traditional AIDS Education Program Attended by Homeless and Drug-Addicted Women Alone or with Supportive Persons.**

**Source:** AIDS Education and Prevention 10(5): 433-446, 1998. (Journal Article: 14 pages)

**Abstract:** This article examined the impact of including a supportive person on the outcomes of two culturally sensitive AIDS education programs, an education-only (traditional) program and a program combining education with self-esteem and coping enhancement (specialized). Research participants included 241 homeless women who were randomly assigned by residence (drug treatment program or shelter) to one of four treatment groups. The outcomes measures at baseline, six, and 12 months were risk behaviors, cognitive factors, and psychological functioning. Results demonstrated significant improvements at both six and 12 months for the entire sample in all outcome variables except active coping. Women in the specialized program improved more on AIDS knowledge and reduction in non-injection drug use than did those in the traditional program, but their active coping scores declined. Participation of a supportive person did not appear to have any effect on outcome (authors).

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**Order #: 3447**

**Authors:** Nyamathi, A., Stein, J.A., Brecht, M.

**Title:** **Psychosocial Predictors of AIDS Risk Behavior and Drug Use Behavior in Homeless and Drug Addicted Women of Color.**

**Source:** Health Psychology 14(3): 265-273, 1995. (Journal Article: 9 pages)

**Abstract:** This study describes a causal model used to assess psychosocial predictors of AIDS risk behavior among homeless African American and Latina women with substance use disorders living in Los Angeles. The model consisted of several variables including personal and social resources, coping styles and barriers to risk reduction. Findings indicate that active coping was associated with fewer general AIDS risk behaviors among both the African American and Latina women and less specific drug use behavior among African American women. Ethnic differences and implications for intervention are discussed (authors).

**Order #: 8575**

**Authors:** Nyanmathi, A.M., Stein, J.A., Swanson, J.M.

**Title:** **Personal, Cognitive, Behavioral, and Demographic Predictors of HIV Testing and STDs in Homeless Women.**

**Source:** Journal of Behavioral Medicine 23(2): 123-145, 2000. (Journal Article: 23 pages)

**Abstract:** Using a multiracial sample of 621 homeless women, the authors tested a latent variable causal model of personal, cognitive, behavioral, and demographic predictors of two coping mediators and the outcome variables of HIV testing and return for test results and a recent STD infection. HIV testing and return were predicted by more social support, greater AIDS knowledge, greater perceived risk for AIDS, and more problem-focused coping strategies. Recent STDs were predicted by more AIDS knowledge, emotion-focused coping strategies, and risky sexual behavior and one measured variable, crack cocaine use. Emotion-focused strategies were predicted by drug use, less self-esteem, more social support, and greater perceived risk for AIDS. Predictors of problem-focused strategies included less drug use, more self-esteem, more social support, more AIDS knowledge, and less risky sexual behavior. Latinas reported more problem-focused strategies and less emotion-focused strategies than African Americans. The theoretical and practical implications for community outreach are discussed (authors).

**Order #: 1805**

**Authors:** O'Connell, J.J., Lebow, J.

**Title:** **AIDS and the Homeless of Boston.**

**Source:** New England Journal of Public Policy 8(1): 541-556, 1992. (Journal Article: 16 pages)

**Abstract:** This article offers a historical perspective on the evolution of the AIDS epidemic within the homeless population of Boston and examines the demographics, risk behaviors, and survival statistics of that epidemic. The Boston Health Care for the Homeless Program is presented as a model of service delivery that offers quality health care to homeless persons with AIDS while addressing the special needs of those bound by the immediacy of the next meal and a night's shelter. The authors contend that health care is inextricably woven into the fabric of social policy and cannot be delivered without an accessible network of housing, entitlement, job training, mental health, and substance abuse services (authors).

**Order #: 12398**

**Authors:** Osher, F.

**Title:** **Substance Abuse and the Transmission of Hepatitis C Among Persons with Severe Mental Illness.**

**Source:** Psychiatric Services 54(6):842- 847, 2003. (Journal Article: 6 pages)

**Abstract:** In this article, the authors sought to better understand the relationship of substance abuse to higher rates of transmission of hepatitis C among persons with severe mental illnesses. The authors assessed 668 persons with severe mental illness for HIV, hepatitis B and hepatitis C infection through venipuncture. Demographic characteristics, substance abuse, and risk behaviors for blood-borne infections were assessed through interviews and collection of clinical data. The article states that the high rates of co-occurring substance use disorders among persons with severe mental illness, coupled with the role of substance abuse as a primary vector for hepatitis C transmission, warrants special consideration (authors).

## HIV/AIDS

**Order #: 6905**

**Authors:** Pfeifer, R.W., Oliver, J.

**Title:** A Study of HIV Seroprevalence in a Group of Homeless Youth in Hollywood, California.

**Source:** Journal of Adolescent Health 20: 339-342, 1997. (Journal Article: 4 pages)

**Abstract:** The objective of this descriptive-exploratory study was to examine the HIV seroprevalence rate among a sample of homeless youth in Hollywood, Calif. A total of 96 respondents (age 14-24) were administered a questionnaire and had their blood drawn to test for the presence of HIV antibodies, during nightly street outreach activities conducted by Covenant House California. The HIV seroprevalence rate was 11.5% for the sample. Chi-square analysis showed strong correlation between HIV status and sexual risk behavior, but not for HIV status and drug-related risk behavior (authors).

**Order #: 2563**

**Authors:** Piltch, D., Anderson, A.

**Title:** A Handbook on the Rights and Responsibilities of Tenants with Certain Disabilities: Mental Illness, Alcohol or Drug Addiction and HIV/AIDS.

**Source:** Boston, MA: Disability Law Center, 1994. (Manual: 150 pages)

**Abstract:** This manual has been written for individuals with various disabilities including mental illness, alcohol and drug addiction and HIV/AIDS. Its purpose is to explain the various Massachusetts and federal laws relating to discrimination and to demonstrate how these laws can be used in individual cases of discrimination. The manual answers questions most commonly asked by tenants, including what to do if a person thinks he or she may have been denied housing illegally. A chart describes what disabilities are protected under which laws, as well as the types of practices prohibited or required and the types of housing covered by each law. The appendix lists agencies to contact for legal, housing and service assistance.

**Available From:** Disability Law Center, 11 Beacon Street, Suite 925, Boston, MA 02108, (617) 723-8455, [www.dlc-ma.org](http://www.dlc-ma.org). (COST: \$12.00)

**Order #: 8277**

**Authors:** Putnam, M., Landes, D., Lieberman, B., Chamberlain, D.

**Title:** Rural AIDS Housing: Issues and Opportunities.

**Source:** Seattle, WA: AIDS Housing of Washington, 1998. (Report: 148 pages)

**Abstract:** This report addresses HIV/AIDS housing and services from a non-metropolitan perspective. It targets small communities and the local organizations that are working to meet the housing needs of people living with HIV/AIDS. The report's focus was shaped by a collaboration of rural HIV/AIDS services and housing experts from throughout the country. It includes an extensive listing of government contacts for each state; a survey of the state of HIV/AIDS and housing in the rural U.S., including the results of consumer needs assessments in Kentucky and Washington; an examination of the unique barriers to the provision of housing and supportive services to rural residents; case studies of successful rural housing and services programs; an extensive bibliography and glossary; links to other resources; and profiles of the reality of living with HIV/AIDS in rural and non-metropolitan parts of the U.S.

**Available From:** AIDS Housing of Washington, 2014 East Madison, Suite 200, Seattle, WA 98122, (206) 322-9444, [www.aidshousing.org](http://www.aidshousing.org).

## HIV/AIDS

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**Order #: 1541**

**Authors:** Raba, J.M., Joseph, H., Avery, R., Torres, R.A., Kiyasu, S., Prentice, R., Staats, J.A., Brickner, P.W.

**Title:** Homelessness and AIDS.

**Source:** In Brickner, B.A., Scharer, L.K., Conanan, B.A., Savarese, M., and Scanlan, B.C. (eds.), Under the Safety Net: The Health and Social Welfare of the Homeless in the United States. New York, NY: W.W. Norton & Company, 1990. (Book Chapter: 19 pages)

**Abstract:** In this chapter, the authors present data concerning HIV infection and homelessness and discuss approaches to prevention, education, treatment, and support services. The authors state that the exact number of HIV infected homeless individuals is unknown and that fear of discrimination contributes to the reluctance of divulging such information upon entrance to a shelter. Studies which attempt to indicate prevalence rates of HIV infection among the homeless are examined, with a particular focus on the contraction and spread of AIDS among homeless adolescents.

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**Order #: 7726**

**Authors:** Rahav, M., Nuttbrock, L., Rivera, J.J., Link, B.G.

**Title:** HIV Infection Risks among Homeless, Mentally Ill, Chemical Misusing Men.

**Source:** Substance Use & Misuse 33(6): 1407-1426, 1998. (Journal Article: 20 pages)

**Abstract:** This article attempts to identify the specific role that each of three conditions afflicting homeless, mentally ill, chemically misusing (HMICM) men plays in exposing these men to the risk of HIV infection. Three hundred and fifteen HMICM men (33 of whom were HIV positive) were interviewed on intravenous drug use (IVDU) and sex practices. Two scales of risky IVDU and sex conducts were constructed and analyzed in relation to HIV status. Strong correlations were found between IVDU practices and HIV seropositivity, and between risky sex conduct and HIV seropositivity. Serious depression was the strongest predictor of risky IVDU practices. Prolonged homelessness was the condition most associated with risky sex conduct. The authors conclude that HMICM men are at high risk for HIV infection, stemming predominantly from two conditions: depression, leading to risky IVDU practices, and homelessness, leading to risky sexual conduct (authors).

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**Order #: 3283**

**Authors:** Rickert, E.J., Rickert, D.L.

**Title:** Different HIV Risk Profiles in Samples of College Students and Homeless Persons.

**Source:** Psychological Reports 76: 1123-1132, 1995. (Journal Article: 10 pages)

**Abstract:** A cross-sectional survey examined demographic characteristics, self-reported sexual behaviors, and knowledge of AIDS in samples of 106 homeless persons and 260 college students. As expected, the two samples differed with respect to age, gender, race, and education. Respondents in both samples possessed moderate knowledge of HIV infection and AIDS and reported they considered their personal risk of HIV infection low. Both samples acknowledged frequent use of alcohol with sexual activity, active and passive oral sex, and lax use of condoms. A discriminant analysis indicated that a greater percentage of college students were sexually active than of the homeless sample and that the homeless group had a higher proportion of individuals who were either homosexual or bisexual, who had sexual contact with multiple partners or who had visited a prostitute, who had sexually transmitted diseases, and who had injected drugs. Although the risk profiles differed, each group reported high-risk behaviors and perceptions of low personal risk of HIV infection.

**Order #:** 12757

**Authors:** Rothbard, A., Metraux, S., Blank, M.

**Title:** Cost of Care for Medicaid Recipients with Serious Mental Illness and HIV Infection or AIDS.

**Source:** Psychiatric Services 54(9): 1240-1246, 2003. (Journal Article: 7 pages)

**Abstract:** This article discusses the economic feasibility of HIV prevention in community mental health settings. The authors examined the cost of care for four groups of adults who were eligible to receive Medicaid, and found that persons with comorbid serious mental illness and HIV infection or AIDS had the highest annual medical and behavioral health treatment expenditures, followed by persons with HIV infection or AIDS only. Annual expenditures for persons with serious mental illness were approximately \$5,800 while HIV infection expenditures were about \$1,800 annually. The authors conclude that given the high cost of treating persons with comorbid serious mental illness and HIV infections or AIDS, the integration of HIV prevention into ongoing case management for persons with serious mental illness who are at risk of infection may prove to be a cost-effective intervention strategy (authors).

**Order #:** 6142

**Authors:** Saez, H., Valencia, E., Conover, S., Susser, E.

**Title:** Tuberculosis and HIV Among Mentally Ill Men in a New York City Shelter.

**Source:** American Journal of Public Health 86(9): 1318- 1319, 1996. (Journal Article: 2 pages)

**Abstract:** The author explain that the current spread of tuberculosis (TB) in New York City has been linked to both the human immunodeficiency virus (HIV) epidemic and homelessness. Recent reports indicate that homeless individuals who have mental illness, particularly men, are at high risk for HIV. This article describes the results of a study conducted at a shelter that accommodated between 600 and 1000 men. Results show there was a high prevalence of TB among these men (36.7%). Various statistics are included.

**Order #:** 8200

**Authors:** Shelter Partnership, Inc.

**Title:** A Report on Housing for Persons Living with HIV/AIDS in the City and County of Los Angeles.

**Source:** Los Angeles, CA: Shelter Partnership, Inc., 1999. (Report: 346 pages)

**Abstract:** This report was commissioned by the City of Los Angeles to examine the housing and social service needs of persons living HIV/AIDS in the County of Los Angeles. The report includes information on a number of topics, including: characteristics of persons living with HIV/AIDS; accessing housing; housing availability; housing preferences; available supportive services; developing HIV/AIDS housing; operating HIV/AIDS housing programs; impact of protease inhibitors on housing; subpopulations of persons living with HIV/AIDS; policy questions; and findings and recommendation.

**Available From:** Shelter Partnership, Inc., 523 West Sixth Street, Suite 616, Los Angeles, CA 90014, (213) 688-2188, [www.shelterpartnership.org](http://www.shelterpartnership.org).

**Order #: 8499**

**Authors:** Shultz, J.M., Greer, P.J., Lalota, M., Garcia, L.M., Valverde, E., Collazo, R., Waters, M., McCoy, C.B.

**Title:** **HIV Seroprevalence and Risk Behaviors Among Clients Attending a Clinic for the Homeless in Miami/Dade County, Florida, 1990-1996.**

**Source:** Population Research and Policy Review 18(4): 357-372, 1999. (Journal Article: 16 pages)

**Abstract:** To examine dynamic seroprevalence in Miami's homeless clients in relation to demographics and risk behaviors over six years, the authors analyzed data from a serosurvey of clients attending the principal clinic serving Miami's homeless. Data were from 3,797 medical encounters with homeless persons who received routine serologic testing and a risk behavior survey. Overall HIV seroprevalence was 15.9% and infection rates for men and women did not differ. Seroprevalence for blacks (19.9%) was significantly higher than for Hispanics (9.1%) or whites (8.3%). Significant increases in seroprevalence were found for clients disclosing high-risk behaviors: male-to-male sex, drug injection, receiving or giving money/drugs for sex, and sexual contact with a drug injector or HIV-infected partner. Seroprevalence declined over six years from 23.2 to 7.2%. The proportion of clients reporting high-risk behavior decreased sharply. Elevated HIV seroprevalence in Miami's homeless clients was strongly associated with high-risk behaviors (authors).

**Order #: 7505**

**Authors:** Smereck, G.A.D., Hockman, E.M.

**Title:** **Prevalence of HIV Infection and HIV Risk Behaviors Associated with Living Place: On-the Street Homeless Drug Users as a Special Target Population for Public Health Intervention.**

**Source:** American Journal of Drug and Alcohol Abuse 24(2): 299-319, 1998. (Journal Article: 21 pages)

**Abstract:** This article examined the prevalence of HIV infection as a function of place of residence and high-risk behaviors in six subpopulations of out-of-treatment drug injectors and crack cocaine users who participated in the National Institute on Drug Abuse (NIDA) Cooperative Agreement project. The subpopulations were blacks, Hispanics, and non-Hispanic whites sampled separately by gender. Overall, the on-the-street homeless population had a significantly higher HIV infection rate (19.0%) than the study population as a whole (11.2%). Rates differed by gender and race, with exceptionally high HIV rates for on-the-street homeless Hispanic males (29%) and females (32%), and for on-the-street homeless black females (38%). The authors conclude that on-the-street homeless drug users were at strong risk for acquisition and transmission of HIV infection and therefore in need of targeted public health interventions to help prevent the spread of HIV/AIDS (authors).

**Order #: 8527**

**Authors:** Sohler, N., Colson, P.W., Meyer-Bahlburg, H.F.L., Susser, E.

**Title:** **Reliability of Self-Reports About Sexual Risk Behavior for HIV Among Homeless Men with Severe Mental Illness.**

**Source:** Psychiatric Services 51(6): 814-816, 2000. (Journal Article: 3 pages)

**Abstract:** The reliability of self-reports of sexual behaviors related to HIV transmission was examined in a study of homeless men with severe mental illness. Thirty-nine patients of a New York City shelter psychiatric program were interviewed about their sexual behaviors in the past six months. The same interview was administered twice, with a one-two-week interval between interviews. Test-retest reliability was assessed using kappa and intra-class correlation coefficients. Reliability was lower for condom use. The authors conclude that reliable self-reports about sexual behavior can be obtained from homeless men with severe mental illness (authors).

**Order #: 7301**

**Authors:** Somlai, A.M., Kelly, J.A., Wagstaff, D.A., Whitson, D.P.

**Title:** **Patterns, Predictors, and Situational Contexts of HIV Risk Behaviors among Homeless Men and Women.**

**Source:** Social Work 43(1): 7-19, 1998. (Journal Article: 13 pages)

**Abstract:** The study discussed in this article investigated psychosocial, relationship, and situational factors associated with HIV risk in a sample of 152 inner-city homeless men and women in Milwaukee, Wis. Different factors were associated with HIV risk level among men and women. In men, high-risk patterns were associated with negative attitudes toward condom use, low levels of intentions to use condoms, high perceived risk of AIDS, and low perceived self-efficacy for avoiding risk. Women at high risk had greater life dissatisfaction; were less optimistic and held more fatalistic views about the future; held more negative condom attitudes; perceived themselves to be at risk; and frequently used alcohol, marijuana, and crack cocaine. The authors conclude that HIV prevention efforts tailored to the different risk circumstances of men and women are urgently needed in social services programs for homeless people (authors).

**Order #: 1581**

**Authors:** Sondheimer, D.L.

**Title:** **HIV Infection and Disease Among Homeless Adolescents.**

**Source:** In Diclemente, R.J. (ed.), Adolescents and AIDS: A Generation in Jeopardy. Beverly Hills, CA: Sage Publications, 1992. (Book Chapter: 15 pages)

**Abstract:** This chapter examines the societal, familial, and individual factors that place homeless adolescents at an unusually high degree of risk for acquiring HIV and presents the types of prevention and intervention strategies that may be the most effective in successfully meeting the unique service requirements of this population. One adolescent population at an increased risk of HIV infection is homeless youth. Given their residential instability, dysfunctional family history, urban geographic locality, perceived and real survival choices, and subsequent deterioration in physical and mental health, it is plausible that they may be at the greatest risk, not only for HIV infection but also for a more rapid progression from HIV and AIDS than their nonhomeless counterparts (author).

**Order #: 8351**

**Authors:** Song, J.

**Title:** **HIV/AIDS and Homelessness: Recommendations for Clinical Practice and Public Policy.**

**Source:** Nashville, TN: National Health Care for the Homeless Council, 1999. (Report: 66 pages)

**Abstract:** This report explores HIV/AIDS and homelessness together. Each condition complicates the other and lives hang in the balance as health care providers and their patients try to sort through the complications and assure critical services. This document is intended for clinicians and other service providers, policy makers, and advocates. It contains information that should help all of these parties to better understand and address a variety of issues faced by persons living with HIV. The document explores current practices of clinicians who provide HIV care to homeless patients, including factors they should take into account when prescribing highly active antiretroviral therapy (HAART). It also identifies deterrents to HIV/AIDS prevention and optimal care for homeless individuals, and suggests directions for further discussion among clinicians and policymakers to help overcome these barriers. (author)

**Available From:** National Health Care for the Homeless Council, Health Care for the Homeless Clinicians' Network, P.O. Box 60427, Nashville, TN, 37206-0427, (615) 226-2292, www.nhchc.org, (COST: \$10.00).

## HIV/AIDS

**Order #: 3383**

**Authors:** St. Lawrence, J., Brasfield, T.

**Title:** HIV Risk Behavior Among Homeless Adults.

**Source:** AIDS Education and Prevention 7(1): 22-31, 1995 (Journal Article: 10 pages)

**Abstract:** Very little information is available regarding HIV risk behavior among homeless adults despite increasing evidence that HIV infection disproportionately affects inner-city residents and disadvantaged populations. In the present study, adults entering a storefront medical clinic for homeless persons completed an AIDS risk survey. The results suggest that homeless adults are engaging in sexual and substance-use behaviors that place them at high risk for HIV infection. Sixty-nine percent of the present sample was at risk for HIV infection from either: (1) unprotected intercourse with multiple partners, (2) intravenous drug use; (3) sex with an intravenous drug user; or (4) exchanging unprotected sex for money or drugs. The results suggest that there is an urgent need to develop and evaluate AIDS-prevention strategies for homeless adults.

**Order #: 10150**

**Authors:** Stoskopf, C.H., Kim, Y.K., Glover, S. H.

**Title:** Dual Diagnosis: HIV and Mental Illness, a Population-Based Study.

**Source:** Columbia, SC: Department of Health Administration, School of Public Health, University of South Carolina, 2001. (Report: 11 pages)

**Abstract:** This is a cross-sectional, population-based (n=378,710) study using hospital discharge abstract data to determine the relative risk associated with having a dual diagnosis of mental illness and HIV/AIDS. The analysis addresses issues of gender, race, and age, as well as types of mental illness. Persons with a mental illness are 1.44 times more likely to have HIV/AIDS. Women are at increased risk of being dually diagnosed. There are no risk differences by race. Those with a specific diagnosis of substance abuse or a depressive disorder are more likely to have a diagnosis of HIV/AIDS.

**Available From:** Dr. Carleen H. Stoskopf, Associate Professor, Department of Health Administration, School of Public Health, University of South Carolina, 800 Sumter Street, 109 Health Sciences Building, Columbia, SC 29208, cstoskopf@sph.sc.edu.

**Order #: 2002**

**Authors:** Summers, T.A.

**Title:** Testimony on AIDS Housing Before the U.S. House of Representatives Subcommittee on Housing and Community Development of the Committee on Banking, Finance, and Urban Affairs.

**Source:** Boston, MA: AIDS Housing Corporation, March 24, 1993. (Testimony: 5 pages)

**Abstract:** This testimony presents the crisis of homelessness for people with AIDS. The role the Department of Housing and Urban Development has played and the problems facing developers of AIDS housing are discussed. These problems include overuse of Single Room Occupancy (SRO) housing, cost limitations, lack of technical assistance, and slow response time by the federal agencies. Several recommendations are put forth, including increased funding, better interagency coordination, and continued targeting of funding specifically for people with AIDS.

**Available From:** AIDS Housing Corporation, 29 Stanhope Street, Boston, MA 02116, (617) 927-0088, www.ahc.org.

**Order #:** 6708

**Authors:** Susser, E., Betne, P., Valencia, E., Goldfinger, S.M., Lehman, A.F.

**Title:** **Injection Drug Use Among Homeless Adults with Severe Mental Illness.**

**Source:** American Journal of Public Health 87(5): 854-856, 1997. (Journal Article: 3 pages)

**Abstract:** This study examined injection drug use among men and women who are homeless and have serious mental illnesses. The data were drawn from related clinical trials conducted in Baltimore (101 men, 49 women) and Boston (85 men, 33 women). The percentages of homeless men with a history of injection drug use were 26% in Baltimore and 16% in Boston; the corresponding rates among homeless women were 8% and 6%. Taken together, these and previous results suggest high lifetime prevalence of injection drug use and associated risks of HIV transmission in this elusive population (authors).

**Order #:** 5560

**Authors:** Susser, E., Miller, M., Valencia, E., Colson, P., Roche, B., Conover, S.

**Title:** **Injection Drug Use and Risk of HIV Transmission Among Homeless Men With Mental Illness.**

**Source:** American Journal of Psychiatry 153(6): 794-798, 1996. (Journal Article: 5 pages)

**Abstract:** This study documents a high lifetime prevalence of injection drug use in a group of homeless men with mental illness. Men reported injection drug use and sexual behaviors with high risk of HIV transmission and gave scant evidence of risk-reduction behaviors. Results of interviews with 218 homeless men show: Fifty (23%) had injected drugs; among those 50, 66% shared needles while 64% used shooting galleries; only 22% cleaned needles with a sterilizing agent such as bleach, and 2% used a needle exchange program; in the past six months 48% had unprotected sex with women and 10% had unprotected sex with men. The authors conclude that although these individuals may fall between service systems and may be difficult to reach, they must be included in efforts to prevent transmission of HIV infection.

**Order #:** 1921

**Authors:** Susser, E., Valencia, E., Conover S.

**Title:** **Prevalence of HIV Infection among Psychiatric Patients in a New York City Men's Shelter.**

**Source:** American Journal of Public Health 83(4): 568-570, 1993. (Journal Article: 3 pages)

**Abstract:** The authors report on the prevalence of human immunodeficiency virus (HIV) infection among psychiatric patients in a New York City shelter for homeless men. They reviewed the records of all 90 men discharged from the shelter psychiatry program to community housing over a 2-year period. HIV serostatus was recorded for 62 of the 90 men. Of these 62, 12 (19.4%) were positive. There were 28 men whose serostatus was not recorded. Data on the HIV risk behaviors of these 28 men suggested that seroprevalence could have been similarly high among them. The results indicate an urgent need to develop and apply preventive interventions for HIV in this population (authors' abstract).

**Order #:** 3157

**Authors:** Susser, E., Valencia, E., Miller, M., Tsai, W.Y., Meyer-Bahlburg, H., Nat, R., Conover, S.

**Title:** **Sexual Behavior of Homeless Mentally Ill Men at Risk for HIV.**

**Source:** American Journal of Psychiatry 152(4): 583-587, 1995. (Journal Article: 5 pages)

**Abstract:** This article investigates sexual behaviors related to HIV/AIDS transmission among homeless men with serious mental illnesses residing in the New York City shelter system. In standardized interviews with 122 men, data on sexual behaviors over the previous six months were collected. Findings indicated that the majority of the men interviewed had unprotected sex with a nonmonogamous partner. High-risk behavior was also associated with cocaine use. The authors propose that preventive intervention could modify the nature, if not the frequency, of sexual episodes (authors).

Order #: 2214

**Authors:** Susser, I., Gonzalez, M.A.

**Title:** Sex, Drugs and Videotape: The Prevention of AIDS in a New York City Shelter for Homeless Men.

**Source:** Medical Anthropology 14: 307-322, 1992. (Journal Article: 16 pages)

**Abstract:** This paper documents a process of social change through participant observation in a shelter for homeless men in New York City. The authors first describe the living environment, emphasizing those aspects of shelter life germane to HIV transmission. Next, the decision of residents, staff and researchers to create an informational video regarding the risks of HIV transmission is detailed. The activities surrounding the making of the video provided the investigators with numerous insights concerning how the men perceived their homelessness, their social relationships, and their views on women and sex. According to the authors, the entire video-making process was an effective self-help strategy for conveying information about HIV transmission and prevention within the shelter environment.

Order #: 7144

**Authors:** Takahashi, L.M.

**Title:** The Socio-Spatial Stigmatization of Homelessness and HIV/AIDS: Toward an Explanation of the NIMBY Syndrome.

**Source:** Social Science and Medicine 45(6): 903-914, 1997. (Journal Article: 12 pages)

**Abstract:** A central element of community response to controversial human service facilities is the socio-spatial construction of stigma. This paper develops a conceptual framework for understanding the constitution and role of stigma in community rejection of human services, particularly those associated with homelessness and HIV/AIDS. Three facets of stigma concerning homelessness and HIV/AIDS (non-productivity, dangerousness, and personal culpability) are offered as a way of understanding the rising tide of community rejection toward human service facilities.

Order #: 7802

**Authors:** Tenner, A.D., Trevithick, L.A., Wagner, V., Burch, R.

**Title:** Seattle Youth Care's Prevention, Intervention, and Education Program: A Model of Care for HIV-Positive, Homeless, and At-Risk Youth.

**Source:** Journal of Adolescent Health 23(2S): 96-106, 1998. (Journal Article: 11 pages)

**Abstract:** YouthCare's project for homeless and runaway youth who are HIV-positive or at high risk for becoming HIV-positive is one of 10 supported by the Special Projects of National Significance. The five major elements of the model include: (1) youth-specific HIV antibody test counseling; (2) outreach; (3) intensive case management for HIV-positive youth; (4) prevention services for youth at high risk for HIV infection; and (5) peer involvement. Quantitative evaluation aided in identifying youth served by the project and the sites at which services should be provided. Preliminary results from qualitative evaluations have stressed the importance of teamwork in designing clinical interventions and providing support to direct-service staff. This article's conclusion stresses that case management for this population, even though time and resource intensive, is effective, and that services need to be flexible and tailored to each client's needs.

## HIV/AIDS

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**Order #: 11844**

**Authors:** United States Department of Housing and Urban Development Community Development and Planning.

**Title:** **Guidance on Combining Program Funds of the McKinney Act Programs and the HOPWA Program with the HOME Program.**

**Source:** Washington, DC: U.S. Department of Housing and Urban Development Community Development and Planning, 2001. (Guide: 24 pages)

**Abstract:** The purpose of this notice is to guide Participating Jurisdictions (PJs) and private nonprofit organizations in using HOME funds together with HUD Continuum of Care homeless assistance funds under the Stewart B. McKinney Act programs. This office also administers the Housing Opportunities for Persons with AIDS (HOPWA) Program which is designed to provide housing and services to persons with HIV/AIDS, and can be used to prevent homelessness among persons with HIV/AIDS, and may assist persons who are homeless. This notice illustrates the uses of and compatibility between HOME and the homeless and HIV/AIDS assistance programs and highlights opportunities that can maximize the effect of combining program funds. The notice is designed to expand the reader's familiarity with the McKinney Act programs, the HOPWA program, and the HOME Program (authors).

**Available From:** U.S. Department of Housing and Urban Development, 451 7th Street S.W., Washington, DC 20410, (202) 708-1112, [www.hud.gov](http://www.hud.gov).

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**Order #: 11143**

**Authors:** Updegraff, J.A., Taylor, S.E., Kemeny, M.E., Wyatt, G.E.

**Title:** **Positive and Negative Effects of HIV Infection in Women With Low Socioeconomic Resources.**

**Source:** Personality and Social Psychology Bulletin 28(3): 382-394, 2002. (Journal Article: 13 pages)

**Abstract:** Predictions generated by cognitive adaptation theory and conservation of resources theory were tested with regard to positive and negative changes associated with HIV infection in an ethnically diverse, low socioeconomic status sample of 189 HIV-positive women. Women reported a significantly greater number of benefits than losses in their experiences with HIV infection. Changes in the domains of the self and life priorities were significantly positive, whereas changes in romantic/sexual relations and view of body were significantly negative. Women who reported more benefits were less likely to report depressive and anxious symptoms. Although health status and optimism significantly predicted depression, anxiety, and negative HIV-related changes, socioeconomic resources (education and income) were the most significant predictors of HIV-related benefit finding. Implications of these results are discussed (authors).

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**Order #: 10185**

**Authors:** Wagner, L.S., Carlin, L., Cauce, A.M., Tenner, A.

**Title:** **A Snapshot of Homeless Youth in Seattle: Their Characteristics, Behaviors, and Beliefs about HIV Protective Strategies.**

**Source:** Journal of Community Health 26(3): 219-232, 2001. (Journal Article: 14 pages)

**Abstract:** The purpose of this study was to determine how initial HIV prevention efforts for homeless youth were received and to determine areas where homeless youth's beliefs and behaviors continued to put them at risk for HIV infection. Interviews were conducted with 289 Seattle homeless youth. Youth reported using condoms with casual partners and with clients during most sexual activity, although condoms were often not used during sex with main partners. Knowledge of HIV protective strategies differed according to youth's behavioral characteristics with heterosexual youth having the weakest knowledge of HIV protective strategies, especially compared with young men who have sex with men. The study concluded that there is room for improvement in youth's knowledge and beliefs about HIV (authors).

**Order #: 10334**

**Authors:** Weinhardt, L.S., Carey, M.P., Carey, K.B., Maisto, S.A., Gordon, C.M.

**Title:** **The Relation of Alcohol Use to HIV-Risk Sexual Behavior Among Adults with a Severe and Persistent Mental Illness.**

**Source:** #Error

**Abstract:** The authors examined the relationship between alcohol use and HIV-risk sexual behavior and tested whether alcohol use immediately prior to sex is related to decreased condom use. The participants were 159 adults living with a severe and persistent mental illness. Each participated in a structured interview to assess all sexual and drug-use behavior over a 3-month period. Analysis of 3,026 sexual behaviors reported by 123 sexually active participants indicated that at the global level, participants who drank more heavily were more likely to have engaged in sexual risk behavior. At the event level, however, alcohol use was not related to condom use during intercourse; that is, participants who used condoms when sober tended to use them to the same extent when drinking.

**Order #: 8584**

**Authors:** Woods, E.R., Samples, C.L., Melchiono, M.W., Keenan, P.M., Fox, D.J., Chase, L.H., Burns, M.A., Price, V.A., Paradise, J., O'Brien, R., Claytor Jr., R.A., Brooke, R., Goodman, E.

**Title:** **The Boston HAPPENS Program: Needs and Use of Services by HIV-Positive Compared to At-Risk Youth, Including Gender Differences.**

**Source:** Evaluation and Program Planning 23: 187-198, 2000. (Journal Article: 12 pages)

**Abstract:** The Boston HAPPENS (HIV Adolescent Provider and Peer Education Network for Services) Program is a linked services network of care for HIV-positive, homeless, and at risk youth in Metropolitan Boston funded by the Special Projects of National Significance Program. This report studies the needs and use of services by HIV-positive youth compared with negative and untested at-risk youth, including gender differences. HIV-positive youth are accessing coordinated care and there are gender differences in the needs for services. Health care policies should facilitate the development and evaluation of comprehensive, youth-specific health services for these hard to reach populations (authors).

**Order #: 7720**

**Authors:** Woods, E.R., Samples, C.L., Melchiono, M.W., Keenan, P.M., Fox, D.J., Chase, L.H., Tierney, S., Price, V.A., Paradise, J.E., O'Brien, R.F., Mansfield, C.J., Brooke, R.A., Allen, D., Goodman, E.

**Title:** **The Boston HAPPENS Program: A Model of Health Care for HIV-Positive, Homeless, and At-Risk Youth.**

**Source:** Journal of Adolescent Health 23(2S): 37-48, 1998. (Journal Article: 12 pages)

**Abstract:** This article describes the Boston HAPPENS (HIV Adolescent Provider and Peer Education Network for Services) Program. Boston HAPPENS provides a citywide network of culturally and developmentally appropriate adolescent-specific care, including: (1) outreach and risk-education counseling through professional and adult-supervised peer staff; (2) access to appropriate HIV counseling and testing support services; (3) life management counseling; (4) health status screening and services needs assessment; (5) client-focused, comprehensive, multidisciplinary care and support; (6) follow-up and outreach to ensure continuing care; and (7) integrated care and communication among providers in the metropolitan Boston area. This innovative network of care offers a continuum from street outreach to referral and HIV specialty care that crosses institutional barriers (authors).

**Authors:** Zanis, D., Cohen, E., Meyers, K., Cnaan, R.

**Title:** HIV Risks Among Homeless Men Differentiated by Cocaine Use and Psychiatric Distress.

**Source:** Addictive Behaviors 22(2): 287-292, 1997. (Journal Article: 5 pages)

**Abstract:** This study examined the relationship among cocaine use, psychiatric distress, and HIV risk behaviors of homeless men. A 3x2 ANOVA was computed to determine overall mean HIV risk behavior, with the first factor representing three levels of psychiatric distress (low, moderate, and high) and the second factor representing use or non use of cocaine. Overall, homeless men who used cocaine had significantly higher HIV risk scores than did noncocaine users. Among the homeless men who used cocaine, those men who reported high psychiatric distress had significantly higher HIV risk scores than did noncocaine users and cocaine users with low psychiatric distress. Moreover, these scores predominantly represented three high risk sexual behaviors: lack of condom use, multiple sex partners, and participation in commercial sex. Outreach efforts that target both substance use and especially high risk sexual practices are urged for this population.